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COVER LETTER

TO: Registration Section Division of Corporations					
Depot Group LLC					
,	ame of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.				
Please return all correspondence concerning	this matter to the following:				
Albert Reale					
Name of Person					
Depot Group LLC					
Firm/Company					
3601 S. Atlantic Ave, Suite 602					
Address	H .				
Daytona Beach Shores, FL 32118					
City/State and Zip Code	<u> </u>				
info@summithoseco.com					
E-mail address: (to be used for future a	innual report notification)				
For further information concerning this matter	er, please call:				
Albert Reale	413 336-1259				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building	P.O. Box 6327				
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314				
Enclosed is a check for the followi	ng amount:				
☑ S25 Filing Fee	S55 Filing Fee & Certified Copy				
INHS18 (2/14)					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

2 107 114	· ·							
1. Na	ame of the limited liability company:	Depot Gro	up LLC					
2. (a)		 		(b)				
` '	Principal office address of limited had (Note: MUST BE STREET A			(0)	Mailing address of limi	•		
	3601 S. Atlantic Ave, Suite 60	2		3601 S.	Atlantic Ave, Su	uite 602		
	Daytona Beach Shores, FL 32	118		Daytona	a Beach Shores,	FL 32118		
	05/22/2017			L170001	12640			
3. 5. (a)	Date of filing/registration in	Florida	4.		Document numbe	T		-
J. (u)	Registered Agent and Registered Office show	n on the record	s of the Flori	da Dept. of Sta	te:			
	Sprayer Depot	1						
	Registered Office Address (MUST BE F	ORIDA STRE	ET ADDRE.	<u> </u>	_			
	7800 N Orange Blossom Trail						1	
	Orlando		, FL_32810)	_	ALLAHASSI SEURITARI	NOW 23	77
(b)						12,		TIII
	Enter name of NEW Registered Agent and/o	NEW Regist	ered Office :	ddress:	_	<u> </u>	E	
	Albert Reale					Volar Pare	NH 11: 23	
	NEW Registered Office Address:		<u> </u>		_			
	3601 S. Atlantic Ave, Suite 602				_			
	Daytona Beach Shores		, _{FL} 32118	3	_			
the cha agent v was/we the arti	imited liability company is not organizange or changes are made, the Florida solution will be identical. Or, in the case of a Fere authorized by an affirmative vote of cless of organization or the operating a ture of a member or authorized representative of	ireet addres lorida limite gine membe	s of the reg d liability ers of the li the limited	gistered offic company, it i mited liabilit	te and the business of the confirmed ty company or as of	office of the identification of the office o	regis nge(s	tered
provisi the obl to mere notified	by accept the appointment as registere ions of all statutes relative to the prope igations of my position as registered a ely reflect a change in the registered of d in writing of this change.	d agent and rand comp gent as prov ffice address	agree to a lete perfor vided for in s, I hereby	ct in this cap mance of my Chapter 60. confirm that	vacity I familian am	van ta aaninh	with nd ac ging is bec	the ecept filed en